

CITY OF EL PASO, TEXAS
DEPARTMENT HEAD'S SUMMARY REQUEST FOR COUNCIL ACTION (RCA)

DEPARTMENT: **Building & Planning Services**

AGENDA DATE: **07/26/05**

CONTACT PERSON/PHONE: **Building & Planning Services, Pat Aauto, (915) 541-4863**

DISTRICT(S) AFFECTED: **N/A**

SUBJECT:

APPROVE: Staffing Table Change

BACKGROUND / DISCUSSION:

Per Civil Service Commission action 7/14/05 wherein the incumbent was approved for reclassification to reflect the scope and level of duties being performed.

PRIOR COUNCIL ACTION:

Has the Council previously considered this item or a closely related one? If so, when?

No

AMOUNT AND SOURCE OF FUNDING:

Already funded for FY/05

Fund Source: 14010703-01101-14703

BOARD / COMMISSION ACTION:

Enter appropriate comments or N/A

Per Civil Service Commission action on 7/14/05

*******REQUIRED AUTHORIZATION*******

LEGAL: (if required) _____

FINANCE: (if required) _____

OTHER:

(Example: if RCA is initiated by Purchasing, client department should sign also)

Information copy to appropriate Deputy City Manager

APPROVED FOR AGENDA:

CITY MANAGER: _____

DATE: _____

DATE: 7/15/05

CITY OF EL PASO
STAFFING TABLE CHANGE REQUEST

Date sent to City Council: 7/26/05

INITIALS 2005-95

Date sent to Human Resources: 7/19/05

DEPARTMENT NAME: Building & Planning Services	(1) HR DEPARTMENT ID 14	(2) ATTACHED DOCUMENTATION <input type="checkbox"/> Description of Duties <input type="checkbox"/> Organization Chart	REQUESTED EFFECTIVE DATE: 7/26/05
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A=add

D=delete

(3) (4) (5) (6) ACTIONS (7) *R/T/C = Regular, Temporary, Contract
*Position Type *L/U = Classified, Unclassified

A/D	# OF POS	Max Head Count	Business Unit	ACCOUNT DESCRIPTION and ACCOUNT CODE Fin. Dept. ID-Fund-Fin. Loc. Proj. or Grnt. (00000000-00000-00000PorG0000)	Position Number(s)	JOB CODE	JOB CLASS TITLE	PLAN GRADE	R/T/C	L/U
A	1	1	COFEP	14010703-01101-14703		1823	Secretary III	GS 19	R	L
D	1	1	COFEP	14010703-01101-14703	00010193	1822	Secretary II	GS 16	R	L
			COFEP							
			COFEP							
			COFEP							
			COFEP							
			COFEP							
			COFEP							

(8) Purpose: ☐ Streamline ☐ Expanded Program ☐ New Program ☐ New Facility ☒ Other (Explain)

(9) STATEMENT OF NEED / CONSEQUENCES OF NOT APPROVING ACTION(S): Per Civil Service Commission action of 7/14/05 wherein the incumbent was approved for reclassification to reflect the scope and level of duties being performed.

ANTICIPATED IMPACT ON:

(10) DEPARTMENT ORGANIZATION/OPERATIONS	(11) DEPARTMENT BUDGET
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(12) DEPARTMENT HEAD SIGNATURE: <i>Patricia A. Adams</i>	DATE: 7-15-05	BUDGET CHANGE <input type="checkbox"/> Required <input type="checkbox"/> Attached	AMOUNT ADDITIONAL FUNDS \$ 1,600.00
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<input checked="" type="checkbox"/> Requested CC and CG is Appropriate <i>ads</i> <input type="checkbox"/> Change Class To <input type="checkbox"/> Change Grade To	HUMAN RESOURCES DEPARTMENT RECOMMENDATION COMMENTS	HUMAN RESOURCES DIRECTOR <i>[Signature]</i>	DATE 7-15-05
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COMMENTS: <i>OK Beitalli 7-19-05</i>	O.M.B RECOMMENDATION / CITY MANAGER APPROVAL
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RECOMMENDATION <input checked="" type="checkbox"/> Position(s) Recommended <input type="checkbox"/> Position(s) Not Recommended	CHIEF FINANCIAL OFFICER	CITY MANAGER <i>[Signature]</i>
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RECEIVED

JUL 15 2005

HUMAN RESOURCES DEPT.
ADMINISTRATION

APPROVED: 7-20-05 RECEIVED DATE

JUL 20 2005

HUMAN RESOURCES DEPT.
ADMINISTRATION

JUL 18 '05 AM 11:59